

February 11, 2000

FDA/Dockets Management Branch
HFA-305
5630 Fishers Lane, Rm. 1061
Rockville, MD 20852

Docket No. 97N-0074

On behalf of the American College of Preventive Medicine, I want to thank you for the opportunity to comment on the President's Council on Food Safety's draft "Food Safety Strategic Plan." ACPM is pleased to provide comments on the draft.

ACPM's comments were prepared by Marcel Salive, MD, MPH, in conjunction with ACPM staff.

Please do not hesitate to contact me if you need additional information.

Sincerely,



Jordan H. Richland, MPH
Executive Director

Attachments

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Comments on
Food Safety Strategic Plan

Each year millions of people in the United States are infected with illnesses caused by the food they eat, and many even die as a result. The “Food Safety Strategic Plan” is a well-written draft on the topic of food safety. Overall it reads well and is coherent. Below are our general comments along with specific comments on the Science and Risk Assessment Goal, Risk Communication Goal, and Organizational Considerations.

General comments:

Overall, there seem to be only a few gaps that may need to be addressed in the plan.

1. The plan seems very focused on acute safety issues. How are the chronic adverse effects of certain dietary elements going to be addressed? 2. The plan also seems very focused on specific hazards. What about general hazards? For example, choking on food. Does increasing the public knowledge of the Heimlich maneuver or other safety actions related to choking prevention/intervention fall under this plan?

Vision Statement and Overarching Goal. The vision statement is acceptable, and emphasizes the value of a public health approach to food safety. The overarching goal is also fine, for the same reason.

Science and Risk Assessment Goal:

ACPM is most interested in the science and risk assessment goal, and appreciates the basis of sound science and risk assessment. Within the goal, there are 6 objectives, which seem generally appropriate. Since they are inextricably linked, it is difficult to prioritize among the 6 objectives. We would suggest that Objective 4, identifying emerging and potential high-risk food safety threats, must be the highest priority. Secondly, enhancing the infrastructure at all levels (Objective 5) and expanding surveillance for food safety (Objective 2) are critical to identifying threats. Of course, linking the enhanced surveillance to public health action that provides safety to the public must be ensured to accomplish the overarching goal.

Among the remaining objectives, there is always a risk that the evaluation step (Objective 6) gets lost in the constant press of crises in food safety.

Specific comments on the Science and Risk Assessment Action Items:

Objective 1 and 2 both mention expanding surveillance. How will this be accomplished? It is a critical feature, yet the action steps do not address it. Evaluation of the current surveillance could be a first step, to identify what works and what does not. But much more can be done. Any surveillance system relies upon the sentinel reporter for the generation of signals of problems. For food safety, this is currently in the health care arena (physician, emergency room, etc.). Should it be expanded to include the public?

How are single cases evaluated for linkages to other cases? This relates to assessing the magnitude of the health threat.

Objective 6 could address specific criteria for evaluating the effectiveness and usefulness of a food safety surveillance program. CDC has published such criteria in the MMWR.

Risk Communication Goal:

ACPM also has interests in risk communication, which is emerging as a new focus in preventive medicine. Therefore, we appreciate the risk communication goal, and the 4 objectives within the goal. Certainly these objectives highlight the need for open government, timely and decisive action, and public education programs that are all accountable and routinely evaluated for their effectiveness.

Organizational Considerations:

The organizational considerations section appropriately begins by recognizing that food safety is a public health activity. This basic precept should drive the functions of assessment, policy development and assurance of food safety, and the functions should drive the government structure set up to conduct the functions. It is clear that the current structure is far too piecemeal to function well. The obvious need to focus on public health suggests that whatever option is chosen, the Department of Health and Human Services must play an increased leadership role in food safety. Our preference would be "Option IV A," because this makes the most sense for linking form and function under the public health umbrella.

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